

STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	PETITION TO RESCIND ORDER OF EMANCIPATION	FILE NO.
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In the matter of _____, an emancipated minor

1. I am interested in this matter and make this petition as the ☐ parent of the minor. ☐ minor.

2. The addresses of the minor and parents of the minor are the same as in the original petition except as to the following:

NAME	RELATIONSHIP	ADDRESS
	Father	
	Mother	
	Minor	

☐ 3. An action within the jurisdiction of the family division of circuit court involving the family or family members of the minor has been previously filed in _____ Court, Case Number _____, was assigned to Judge _____, and ☐ remains ☐ is no longer pending.

4. This court entered an order of emancipation on _____ .
Date

5. The order of emancipation should be rescinded for one or more of the following reasons:

- ☐ a. The minor is indigent and has no means of support.
☐ b. The minor and the minor's parent(s) agree that the order should be rescinded.
☐ c. The family relationship has resumed and the order of emancipation is in conflict with this relationship.

6. I understand that rescission of an order of emancipation does not alter any contractual obligations or rights or any property rights or interests that arose during the period of time that the emancipation order was in effect.

I REQUEST that the order of emancipation be rescinded.

I declare that this petition has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

_____ Attorney signature	_____ Date
_____ Name (type or print)	_____ Signature
_____ Address	_____ Name (type or print)
_____ City, state, zip	_____ Address
_____ Telephone no.	_____ City, state, zip
	_____ Telephone no.

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